



Value Offer Application Form

Please complete the following details and return to lisa@kalamundachamber.com or post to PO BOX 417, Kalamunda WA 6926.

This is a (please tick) NEW APPLICATION (cost: \$55 members, \$110 non-members)
 EXISTING APPLICATION (cost: \$30 members, \$60 non-members)

Business Details

Business Name:	
Business Address:	
Business Phone:	
Contact Name:	
Position:	
Mobile:	
Email:	
Billing Address:	

Value Offer Details

Full Details of Offer:	
	(i.e. Buy 2 doughnuts and get 1 doughnut free)
Period Offer is valid:	
	(Insert dates, must commence on a Monday. Must be no less than one (1) week and no longer than one (1) month)

Note: Value offer voucher will specify the above business and address as being the only place the offer is valid.

Please send a copy of your Business Logo in *pdf, jpeg* or *tif* format to lisa@kalamundachamber.com.
Logo will be used on the Shop Local voucher.

Terms and Conditions

This application form must be completed and sent through no later than 3 working days prior to start of value offer period. A Tax Invoice will be sent to you on receipt of this application. Payment is required within 7 days of issue. Should payment not be received within this time, Shop Local - Kalamunda Chamber of Commerce reserves the right to withdraw the offer from the website.

Benefits and offers provided through the Shop Local Program can only be redeemed upon presentation of the voucher within the stated timeframe of the offer made by the participating business. Benefits are not valid with any other concessional or discount offer made by any participating business.

The Shop Local Program is not transferable and remains the property of the Kalamunda Chamber of Commerce. The Kalamunda Chamber of Commerce reserves the right to terminate or suspend a membership in the case of inappropriate use of the vouchers.

The Kalamunda Chamber of Commerce, its officers, staff and contractors will accept no liability to the voucher-holder arising from any act or omission of any third party that may offer goods, services, discounts and or/benefits to the voucher-holder in connection with or in association with the Shop Local Program.

I am authorised to commit to this value offer on behalf of this company and hereby agree to abide by the terms and conditions outlined above.

Signature _____
Print Name _____
Date _____